ISSUE SLIP STAPLE AREA (for additional cross references)

COSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	3	TO FOR	707/23/01
O.I.P.E. CLASSIFIER	mann	137	8-21-01
FORMALITY REVIEW		1118	11-14-01
RESPONSE FORMALITY REVIEW	'7 <i>H</i>	11/2	11-1-4-01

INDEX OF CLAIMS

<u>=</u>	Rejected Allowed (Through numeral) Canceled Restricted	N	rterence eat
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÷	Restricted 0	Objected
	Claim Date	Claim Date
Claim > Date		ब्र
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700	58	108
18	59	109
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10 0	61	111
	62	112
13 / /	63	113
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1500	65	115
	66	116
10 17 17 1	67	118
18 4	68	119
19 0	69	120
20 0	70	121
21 1	71	122
22 0	72 73	123
23	73	124
24	75	125
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26	77	127
27	78	128
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36	86	137
37	87 88	138
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If more than 150 claims or 10 actions staple additional sheet here

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